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## Request for Continued Examination (RCE) Transmittal

Address to: Mail Stop RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

| Application Number   | 10/554,028            |
|----------------------|-----------------------|
| Filing Date          | June 30, 2006         |
| First Named Inventor | Chunquan Chen         |
| Art Unit             | 1616                  |
| Examiner Name        | Alton Nathaniel Pryor |
| Attorney Docket No.  | EMD-126US             |

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

| 1 Submis                                                                                                                                                                                                                                                                                                                                                                                                      | ssion       | requir           | ed under 37 CF                                                                                                                                                      | R 1 114 Not     | e lft             | he D(         | 'E is prope                | ar on         | v proviouchy fi | lad unantared amondments |  |  |  |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|-------------------|---------------|----------------------------|---------------|-----------------|--------------------------|--|--|--|--|
| 1. <u>Submission required under 37 CFR 1.114</u> Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant <u>must</u> request non-entry of such amendment(s). |             |                  |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| а. 🗌                                                                                                                                                                                                                                                                                                                                                                                                          | Prev<br>may | viously<br>be co | y submitted. If a final Office Action is outstanding, any amendments filed after the final Office Action onsidered as a submission even if this box is not checked. |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| j.                                                                                                                                                                                                                                                                                                                                                                                                            |             | Cons             | ider the arguments in the Appeal Brief or Reply Brief previously filed on                                                                                           |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| ii.                                                                                                                                                                                                                                                                                                                                                                                                           |             | Other            | er                                                                                                                                                                  |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| b. ⊠                                                                                                                                                                                                                                                                                                                                                                                                          |             | losed            |                                                                                                                                                                     |                 |                   | _             |                            |               |                 |                          |  |  |  |  |
| İ.<br>                                                                                                                                                                                                                                                                                                                                                                                                        |             |                  | ndment/Reply                                                                                                                                                        |                 | iii.              |               |                            | on Di         | sclosure State  | ment (IDS)               |  |  |  |  |
| ii.                                                                                                                                                                                                                                                                                                                                                                                                           |             | Affida           | vit(s)/Declaration                                                                                                                                                  | ı(s)            | iv.               |               | Other                      |               | <u>_</u> ·      |                          |  |  |  |  |
| 2. Miscell                                                                                                                                                                                                                                                                                                                                                                                                    | aneou       | ıs               |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| а. 🗌                                                                                                                                                                                                                                                                                                                                                                                                          |             |                  |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| b. 🔲                                                                                                                                                                                                                                                                                                                                                                                                          | Othe        |                  |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| <u>. [</u>                                                                                                                                                                                                                                                                                                                                                                                                    | 71.         | DOF (            |                                                                                                                                                                     | . 4 47/ )       |                   |               |                            |               |                 |                          |  |  |  |  |
| 3. Fees<br>a. □                                                                                                                                                                                                                                                                                                                                                                                               |             |                  | ee under 37 CFR                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| a. ∐                                                                                                                                                                                                                                                                                                                                                                                                          | Acco        | unt No           | o. 18-0350. I hav                                                                                                                                                   | e enclosed a du | any ui<br>plicate | naerp<br>copv | ayment of `<br>of this she | rees,<br>eet. | or credit any   | overpayments, to Deposit |  |  |  |  |
| i.                                                                                                                                                                                                                                                                                                                                                                                                            |             |                  | lo. <u>18-0350</u> . I have enclosed a duplicate copy of this sheet.  Efee required under 37 CFR 1.17(e).                                                           |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| ii.                                                                                                                                                                                                                                                                                                                                                                                                           | $\boxtimes$ |                  | ension of Time fee (37 CFR 1.136 and 1.17).                                                                                                                         |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| iii.                                                                                                                                                                                                                                                                                                                                                                                                          |             | Other            |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| b. 🗀                                                                                                                                                                                                                                                                                                                                                                                                          | Che         | ck in th         | ne amount of \$                                                                                                                                                     | is enclosed     | l.                |               |                            |               |                 |                          |  |  |  |  |
| c. 🛛                                                                                                                                                                                                                                                                                                                                                                                                          |             |                  | y credit card (For                                                                                                                                                  |                 |                   |               |                            |               |                 |                          |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                               | WAF         | RNING            | : Information or                                                                                                                                                    | this form may   | beco              | me p          | ublic. Cre                 | dit c         | ard information | on should not be         |  |  |  |  |
|                                                                                                                                                                                                                                                                                                                                                                                                               | incl        | uded c           | on this form. Pro                                                                                                                                                   |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| <u> </u>                                                                                                                                                                                                                                                                                                                                                                                                      |             |                  | SIGNATUR                                                                                                                                                            | E OF APPLICA    | NT, A             | TTOR          | NEY, OR                    | AGE           | NT REQUIRE      | D                        |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                     |             |                  | y Me                                                                                                                                                                | 'ad             |                   | Date          | 7/10                       | 1/1           | ι               | 7-14-11                  |  |  |  |  |
| Name (Print/Type) Lisa                                                                                                                                                                                                                                                                                                                                                                                        |             |                  | Lisa Mead                                                                                                                                                           |                 |                   | Reg           | istration No               | o. (At        | torney/Agent)   | 64,253                   |  |  |  |  |
| CERTIFICATE OF MAILING OR TRANSMISSION                                                                                                                                                                                                                                                                                                                                                                        |             |                  |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.                                                      |             |                  |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| Signature                                                                                                                                                                                                                                                                                                                                                                                                     |             |                  |                                                                                                                                                                     |                 |                   |               |                            |               |                 |                          |  |  |  |  |
| Name (Print/Type)                                                                                                                                                                                                                                                                                                                                                                                             |             |                  |                                                                                                                                                                     |                 |                   |               |                            |               | Date            |                          |  |  |  |  |

This collection of information is required by 37 CFR 1.114. This information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.